

**Evansville Rescue Mission, Inc.** 

(K262)

Program Year 2024

**Evansville Rescue Mission, Inc. (K262)** 

500 E Walnut

Evansville, IN 47713-0000

**Food Service Contact** 

Mr. David Wenning Food Service Director (812) 421-3800

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**Executive Contact** 

Mr. Joshua Nichols Senior Vice President (812) 421-3800

Joshua.nichols@ermstaff.org

No. of Sites / Reviewed: 1 / 1 Month of Review: March 2024

#### **Commendations**

- \* Staff were willing to work with the reviewer to correct some issues when noted during the on-site review immediately.
- \* The staff was friendly, eager to learn during the review process, and flexible to the reviewer's needs.

## **Technical Assistance**

- \* During the site visit, it was observed that adults receive meals. The meals being served included the same portions as the residents' meals, which included products provided by the food distribution program. However, the adult meals are not recorded on the daily count sheets or reported to the financial department.

  At the end of each program year, the RCCI transfers money from the general operating fund to the nonprofit school
  - foodservice account to bring the account to a \$0.00 balance. This transfer should list out the line item under revenue, the amount that would be transferred for adult meals served for the year. For example, if the lunch price is \$5.00 and 250 adult lunches were served for the year, then part of the transfer would show that \$1,250.00 is for adult meals.
- \* Annual financial and verification summary reporting was beyond the deadline posted by IDOE. Please be cognizant of upcoming due dates within the program. For a printable calendar with due dates, please visithttps://docs.google.com/document/d/1gQejacWaNHaz\_tozgZFehNz0p59JDFW21J9SHz5-BPE/edit?usp=sharing
- \* The USDA "And Justice for All" poster was not displayed in one area of the facility where meals are served. Sponsors should hang the latest version in the meal service area. Since the USDA has not printed civil rights posters recently, consider copying the poster in the original 11x17 size.

# Meal Counting & Claiming - Evansville Rescue Mission, Inc. (K262)

313. On-site observations validate Off-Site Assessment Tool responses to Meal Counting & Claiming questions and responses demonstrate compliance with FNS requirements

# Finding 10153: Edit Checks

Edit checks were not conducted.

#### **Corrective Action:**

Technical assistance was provided during the on-site review for edit check procedures. As a result, the chief of staff completed an edit check for March and April 2024 using the IDOE fillable forms. The form has been implemented and will be completed using the daily meal count sheets prior to submitting the monthly claim for reimbursement. **Therefore, an additional response is not required.** 

# **General Program Compliance - Evansville Rescue Mission, Inc. (K262)**

808. On-site observations validate Off-Site Assessment Tool responses to Civil Rights questions and responses demonstrate compliance with FNS requirements

# **Technical Assistance- Racial Ethnic Data Collection**

Racial Ethnic data collection was discussed with the chief of staff during the on-site review. The reviewer provided FNS 113-1: Civil Rights Compliance and Enforcement resource materials as a reference. Separate categories shall be used when collecting and reporting race and ethnicity to provide flexibility and ensure data quality. The form used to collect race and ethnic categories was updated to clarify the ethnicity question.

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808. On-site observations validate Off-Site Assessment Tool responses to Civil Rights questions and responses demonstrate compliance with FNS requirements

# Finding 10152: Civil Rights Training

The local trainer for Civil Rights did not complete the training prior to training staff.

#### **Corrective Action:**

During the on-site review, the trainer completed Civil Rights training through Moodle and passed the quiz to receive a certificate of completion. The sponsor was reminded to ensure that trainer(s) are proficient in training topics prior to conducting training. The sponsor agrees to have documentation of training demonstrating proficiency in topics prior to training others. **Therefore, an additional response is not required.** 

1217. SFA's process and frequency for tracking training hours is sufficient

# Finding 10126: Professional Standards Training Requirements and Documentation

Training for all food service staff is not being routinely conducted or tracked sufficiently. Documentation of training has been an annual requirement since the Professional Standards requirements beginning in 2016-2017. At the time of review, no training documentation or tracking of completed training was available.

#### **Corrective Action:**

Annual training for all staff with food service responsibilities is a program requirement. For corrective action, provide a written procedure outlining how staff training will be conducted and documented moving forward to ensure this requirement will be met. Additionally, provide a detailed plan of what training will be conducted by June 30, 2024, to ensure that required hours are met for food service staff.

#### **Technical Assistance:**

Any training completed should have a dated agenda, topics discussed, and staff signatures. If handouts are provided during the training, copies should be maintained with the training documentation.

Required Professional Development Training Hours:

https://docs.google.com/document/d/1Ho8j7bMBtNtlYwq14INtakNMHpypSVN9ALp6iPsCTzk/edit?usp=sharing General Training Agenda Template: <a href="https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:893568f0-3317-327d-b7f7-55ef5969d162">https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:893568f0-3317-327d-b7f7-55ef5969d162</a>

IDOE Professional Standards Tracker: https://www.in.gov/doe/files/copy-professional-standards-tracking-idoe-final.xlsx

1400. The written food safety plan contains required elements and a copy is available at each school

Finding 9143: A copy of the written food safety plan is not available at each school.

#### Corrective Action:

During the onsite review, the food service director provided a copy of the food safety plan to the Youth Care Center location. **Therefore, an additional response is not required.** 

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**Youth Care Center (Z136)** 500 E Walnut Evansville, IN 47713-0000 **Food Service Contact**Mr. Joshua Nichols
Senior Vice President
(812) 421-3800

Month of Review: March 2024 Date of Onsite Review: April 24, 2024

## **Meal Counting & Claiming - Youth Care Center (Z136)**

325. Review Period- meal counts by category were correctly used in the claim for reimbursement

## Finding 9074: Meal counts not used correctly in the RCCI's claim for reimbursement. \*Repeat Finding

The sum of the location's daily meal counts for the review period does not match the State Agency's validated meal counts for the location. Similarly, the RCCI's claim for the location for the Review Period does not match the State Agency's validated meal counts for the location for the Review Period. The problem is considered systemic because the contributing factors are built into the process and would likely recur if the process is not changed.

Meal counts are not taken at the point of service. They are taken on a meal count log after service. However, this form is not used in any of the counting and claiming procedures. A population log is completed daily, but the meal counters do not complete it. Comparing the meal count log, population log, and completed production records demonstrates different totals of meals served to residents.

## **Corrective Action:**

The number of qualifying meals served each day should be counted and recorded daily. This count should be done at the time and place where the meals are served. The meal count for each location should be recorded daily. Technical assistance was provided during the on-site review for different meal counting scenarios that could be applied to the site locally. The site partially implemented point-of-service (POS) meal counting during the breakfast observation. The process observed complied with meal counting practices to yield accurate results.

For corrective action, the sponsor is required to submit the POS meal count sheets supporting the newly implemented meal count process from May 1-31, including a copy of the completed edit check. Due to the Performance Standard 1 repeat finding, claims for reimbursement will be placed on hold until corrective action has been submitted and the State Agency has reviewed the meal counting and claiming procedures for accuracy.

## **Meal Components & Quantities - Youth Care Center (Z136)**

400. Day of Review- all required meal components were available to all students during the entire meal service

## Finding 9002: Meal components missing on Day of Review.

As observed on the Day of Review, required meal components were not available on every reimbursable meal service line to all participating students. The lunch meal service was missing the fruit component prior to the beginning of the meal service.

## **Corrective Action:**

At the time of the review, the kitchen staff added 1 cup of mixed fruit to the planned meal option to meet the daily requirement. **Therefore, an additional response is not required.** 

# **Technical Assistance:**

The sponsor was advised and given the opportunity to add the missing meal component before the meal service started.

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403. Day of Review- fluid milk (or allowable substitutions) was available in at least two allowable varieties throughout the serving period on all meal service lines

Finding 9053: Milk variety not offered throughout the serving period on Day of Review. \*Repeat Finding As observed on the Day of Review, at least two types of required milk varieties were not available throughout the serving period.

#### **Corrective Action:**

Technical assistance was provided on-site regarding ways to offer milk choices in the program setting. During the on-site review, the administration created and implemented a daily milk preorder form to be submitted prior to meals being provided to the residents. **Therefore, an additional response is not required.** 

#### **Technical Assistance:**

When it was observed that only one type of milk was being offered, the FSD was advised and given the opportunity to add another type of milk to the meal service line(s).

404. Day of Review- signage explaining the reimbursable meal was posted near/at the beginning of the service line and did not promote water or any other beverage as an alternative to milk

Finding 9055: No signage explaining what constitutes a reimbursable meal at the beginning of the service line. As observed on the Day of Review, signage explaining what constitutes a reimbursable meal for breakfast and lunch is not identified near or at the beginning of the meal service line.

## **Corrective Action:**

Meal signage must explain to students what constitutes a reimbursable breakfast and lunch. During the on-site review, the reviewer provided signage. All the signs were posted in the meal service areas. **Therefore, an additional response is not require**d.

409. Review Period- all required meal components per weekly meal pattern requirements were offered and served to students

# Finding 9075: Production records/supporting documentation indicate weekly meal pattern requirements for the age/grade group(s) not met.

Based on a review of production records and other supporting food crediting documentation during the Review Period-March 2024, some meals served during the week reviewed did not meet the appropriate daily and weekly meal pattern requirements for the age/grade group(s) being served. Meals missing required meal components during the week reviewed:

Two days did not consist of a served fruit. The fruit component was planned for both days in the cycle menus.
 However, the implementation of the menu did not have a fruit serving that was prepared or served, resulting in 52 meals being disallowed.

## **Corrective Action:**

For corrective action, please create a written standard operating procedure (SOP) that explains how the daily site staff will implement the planned menu, address substitutions of the meal pattern when necessary, and how documentation will be completed. The SOP should also include how the daily production will be monitored. Additionally, complete the meal pattern training found on the Moodle website and provide the certificate as proof of completion.

#### **Technical Assistance:**

The IDOE Moodle website is found here: https://moodle.doe.in.gov/

Meal pattern requirements can be found here: https://www.in.gov/doe/nutrition/national-school-lunch-program/

409. Review Period- all required meal components per weekly meal pattern requirements were offered and served to students

#### Finding 10139: Production Records

The following issues were noted with production records:

Milk was not tracked by variety on the production records.

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#### **Corrective Action:**

Technical assistance regarding the completion of production records during the onsite review was provided to the foodservice staff. Milk flavors must be tracked separately to show at least two types of milk were available to students during the entire meal service. For corrective action, completed (breakfast and lunch) production records for one week must be submitted to the State Agency.

410. Review Period- planned menu quantities meet the meal pattern requirements

## Finding 9000: Whole Grain-Rich Rule \*Repeat Finding

The lunch whole grain-rich (WGR) percentage is less than 80% of all the grains offered over the course of the week. The indepth menu review week demonstrated only 57.89% of the grains offered at lunch were WGR.

# **Corrective Action:**

At least 80% of all grains offered over a week must be whole grain-rich. The remaining 20% or less must be enriched. Sweet grains and "extras" are also required to meet the 80/20 WGR rule. For corrective action, please explain what changes have been made to the grain offerings to meet the 80% requirement. Additionally, the menu planner is required to review the FNS whole grain resource. Once completed, sign and date the cover of the resource and submit a copy to the reviewer. https://www.fns.usda.gov/tn/whole-grain-resource-national-school-lunch-and-breakfast-programs.

## **Technical Assistance:**

Whole grain-rich rule- https://docs.google.com/document/d/1BoFu 0vjI5PH8TnsltKSiB1So8d-azKl1jI-3t6kUAw/edit

410. Review Period- planned menu quantities meet the meal pattern requirements

# Finding 9076: Planned menus served during review month do not meet portion size/quantity requirements. \*Repeat Finding

Production records were reviewed for the review period to determine whether the portion sizes of meal components from the menu planned and served during the review period meet the minimum meal pattern requirements for the age/grade group(s) being served. An insufficient vegetable, fruit, and grain serving was noted in the 9-12 grade group for lunch. Meals served with insufficient portion size(s), or insufficient quantities of meal components are incomplete and are not reimbursable, resulting in 45 meals (lunch) being disallowed.

#### Lunch 9-12

- Vegetables
  - o Insufficient daily compliance for one day- 3/4 cup instead of 1 cup
- Fruit
  - o Insufficient daily compliance for one day- 1/2 cup instead of 1 cup
  - Insufficient weekly compliance- 6.5 cups instead of 7 cups
- Grain
  - Insufficient daily compliance for two days- Crediting documentation of sliced bread (26g) is .75 oz equivalent grains.

#### **Corrective Action:**

For corrective action, please explain how the menu will be corrected to meet portion size requirements. Additionally, a corrected menu must be submitted to the State Agency.

# **Technical Assistance:**

The location was provided technical assistance during the on-site visit. The menu planner is reminded to plan menus that meet all components in both the daily and weekly serving sizes.

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410. Review Period- planned menu quantities meet the meal pattern requirements

## Finding 10171: Crediting Documentation \*Repeat Finding

Although the menus are planned to meet the daily & weekly meal pattern requirements, the food service director did not have standardized recipes, CN labels, product formulation statements, or Food Buying Guide formulations during the review period and/or day of review.

#### **Corrective Action:**

Technical assistance was provided during the on-site review of the FBG, as well as the difference between food labels (vendor, CN, PFS) and standardized recipes.

# For corrective action, please complete the following:

- 1. All recipes are required to be standardized. Please include a one-week menu cycle for the recipes.
- 2. Crediting documentation should be maintained on file for the items that are being planned, purchased & served for the School Nutrition Program. Please provide a one-week menu cycle for updated crediting documentation.

## **Technical Assistance:**

Child Nutrition Labels and Product Formulation Statements Fact Sheet-

https://docs.google.com/document/d/1WO9wrDbYsNOaKQswE 6cGlVxdo9bQ3QTWQ--K07ReFk/

Food Buying Guide- https://www.fns.usda.gov/tn/food-buying-guide-for-child-nutrition-programs

Instructions to Standardize a Recipe-https://drive.google.com/file/d/1KcFgibQbJ5FswOb68giiYn03oYU9frJr/view?usp=sharing Child Nutrition Recipe Box- https://theicn.org/cnrb/recipes-for-schools/?page\_id=113192

## **General Program Compliance - Youth Care Center (Z136)**

1405. Two food safety inspections are received each school year from the local health department

# Finding 9146: Less than 2 food safety inspections were done in the current school year and no documentation that 2 inspections have been requested.

The location did not provide two food safety inspection reports for the current program year or last program year, and no documentation was available to substantiate the RCCI's request for two food safety inspections for either program year.

#### **Corrective Action:**

The reviewer provided the chief of staff with the template for requesting health inspections. During the on-site review, the sponsor sent the health department a request for two inspections for the current program year. Additionally, the chief of staff has added an internal calendar reminder for the food service director to complete this task by July 15 annually. **Therefore, an additional response is not required.** 

## 1408. Temperature logs are available

## Finding 9149: Temperature logs unavailable for review.

FNS requires each location in the RCCI to maintain temperature logs for a period of six months. Temperature logs unavailable for final cooking of food, dish machine, & sanitizer. Local health departments may require longer retention.

#### **Corrective Action:**

Temperatures must be monitored and logged daily. For corrective action, submit logs with at least one week of monitored temperatures to the State Agency.

# **Technical Assistance:**

Sample food safety logs can be found at the following website: <a href="https://www.in.gov/doe/nutrition/food-safety/#Log">https://www.in.gov/doe/nutrition/food-safety/#Log</a> Templates for Record Keeping

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